

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Cardiology Political Action Committee

ADDRESS (number and street)

2400 N St NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20037-1153

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00375360

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carlton G. Davids

Signature of Treasurer

Carlton G. Davids

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 09 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y 09 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		71359.29
(b) Cash on Hand at Beginning of Reporting Period.....	65473.52	
(c) Total Receipts (from Line 19)	52891.99	361049.77
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	118365.51	432409.06
7. Total Disbursements (from Line 31)	77680.82	391724.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40684.69	40684.69
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
09	/	01	/	2013

To:

M M	/	D D	/	Y Y Y Y
09	/	30	/	2013

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

46280.35

296310.09

(ii) Unitemized

5933.33

50449.01

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

52213.68

346759.10

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

52213.68

346759.10

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

678.31

14290.67

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

52891.99

361049.77

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

52891.99

361049.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	680.82	14204.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	680.82	14204.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	77000.00	375000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2520.08
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2520.08
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	77680.82	391724.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77680.82	391724.37

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	52213.68	346759.10
34. Total Contribution Refunds (from Line 28(d))	0.00	2520.08
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52213.68	344239.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	680.82	14204.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	678.31	14290.67
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	2.51	-86.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brian G. Abbott M.D., F.A.

Mailing Address 12 Woodhaven Rd

City

Barrington

State

RI

Zip Code

02806-4322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brown/ Rhode Island Hospital

Occupation

NUCLEAR CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	3		

Transaction ID : 24ED6F16A28FB78395B

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. William Michael Allen M.D., F.A.

Mailing Address 1420 Pleasant Ridge Rd

City

Rogers

State

AR

Zip Code

72756-0618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	3		

Transaction ID : 8F3159E49CFA741644F

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Juan M. Aranda Jr., M.D.,

Mailing Address 356 Turkey Crk

City

Alachua

State

FL

Zip Code

32615-9367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shands at the University of Florida

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	5		2	0	1	3		

Transaction ID : 42D9B8328FB32C0741A4

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

958.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 63

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nizar A. Assi M.D., F.A.

Mailing Address 730 Kraffel Ln

City

Chesterfield

State

MO

Zip Code

63017-8057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gateway Cardiology, PC

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

212.94

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : 423AA113C4FEB1996C30

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. C. Noel Bairey Merz M.D., F.A.

Mailing Address 16664 Cumbre Verde Ct

City

Pacific Palisades

State

CA

Zip Code

90272-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars-Sinai Medical Center

Occupation

PREVENTIVE CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 11 / 2013

Transaction ID : 594BCEAAACE29E079161

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. John D. Baker M.D., F.A.

Mailing Address 4790 Irvine Blvd
105-141

City

Irvine

State

CA

Zip Code

92620-1973

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Cardiovascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : A256A1913DBD6990F8E

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1280.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Willie W. Bell M.D., F.A.

Mailing Address 1108 Bimini Rd

City

Jacksonville

State

FL

Zip Code

32216-3218

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent's Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 04F79356456030178FA

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Gerald G. Blackwell M.D., F.A.

Mailing Address 1733 Orchard Pl

City

Kingsport

State

TN

Zip Code

37660-4523

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : E18A9FBF96FA48231E1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Alfred A. Bove M.D., Ph.D

Mailing Address 110 Anton Rd

City

Wynnewood

State

PA

Zip Code

19096-1226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Temple University Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 25 / 2013

Transaction ID : 46DD9E961699440E3604

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joy C. Burnette RN, A.A.C.

Mailing Address 4562 Ridgeland Dr SW

City State Zip Code
Lilburn GA 30047-4348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ingenious Med

Occupation

OTHER SPECIALTY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 9F4F4378AD4A6CA490B

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Joseph G. Cacchione M.D., F.A.

Mailing Address 5740 Hickory Knoll Ct

City State Zip Code
Fairview PA 16415-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

09 / 25 / 2013

Transaction ID : 418387225F945C7C9465

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

c. Linda P. Calhoun M.D., F.A.

Mailing Address 1725 New Hanover Medical Park Dr

City State Zip Code
Wilmington NC 28403-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Fear Heart Associates

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 24 / 2013

Transaction ID : 58D0D4E3-D34E-4299-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

825.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 63

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. William B. Calhoun M.D., F.A.

Mailing Address PO Box 2519

City

Tupelo

State

MS

Zip Code

38803-2519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Associates of North Mississ

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : F2119DE18F59B46097F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Paul N. Casale M.D., F.A.

Mailing Address 1056 Buchanan Ave

City

Lancaster

State

PA

Zip Code

17603-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 1B462DF377828E73728

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Peter J. Chaille M.D., F.A.

Mailing Address 427 Chestnut Forest Cv

City

Fort Wayne

State

IN

Zip Code

46814-8926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 03 / 2013

Transaction ID : 479189FF27D82F89D39F

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

1541.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 63

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hollace D. Chastain II, M.D.,

Mailing Address 1819 Braemar Dr

City

Fort Wayne

State

IN

Zip Code

46814-9364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 29 / 2013

Transaction ID : 4BA084159D5DE7B26C42

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Richard A. Chazal M.D., F.A.

Mailing Address 671 N Town and River Dr

City

Fort Myers

State

FL

Zip Code

33919-5931

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

09 / 07 / 2013

Transaction ID : 4665A3D129DBCE2DEEA1

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. Bernard A. Clark III, M.D.,

Mailing Address 95 Johnny Cake Ln

City

Glastonbury

State

CT

Zip Code

06033-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 29 / 2013

Transaction ID : 40448D33F70D829311D2

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

233.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Clark M.D., F.A.

Mailing Address 3821 Shoal Creek Ct

City State Zip Code
 Augusta GA 30907-9431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Augusta Cardiology Clinic

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 893AE78BDF62F9F9651

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Marc C. Cohen M.D., F.A.

Mailing Address 1445 Huntingdon Rd

City State Zip Code
 Abington PA 19001-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 360D4671E01CBADA43E

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

c. James C. Cook Jr., M.D.,

Mailing Address 1555 Highway 238

City State Zip Code
 Jacksonville OR 97530-9770

FEC ID number of contributing
federal political committee.

C

Name of Employer

Providence Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 4DAD1005F09CE3EC9E3

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J. Cooper M.D., F.A.

Mailing Address 28754 E River Rd

City

Perrysburg

State

OH

Zip Code

43551-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Toledo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : A2421D26D4C3C00A2C5

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Larry Van-Thomas Crisco M.D., F.A.

Mailing Address 466 Seminole Ave NE
Ste 315

City

Atlanta

State

GA

Zip Code

30307-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph's Medical Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 11 / 2013

Transaction ID : 5542AF9DBC952217F28

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

c. George H. Crossley III, M.D.,

Mailing Address 276 Stratton Pl

City

Brentwood

State

TN

Zip Code

37027-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Thomas Heart

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 25 / 2013

Transaction ID : 4D87B7B7A87968A46CC7

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1615.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ira M. Dauber M.D., F.A.

Mailing Address 9933 E Berry Dr

City

Greenwood Village

State

CO

Zip Code

80111-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Denver Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 11 / 2013

Transaction ID : DC97AC0835E579E6E6D

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. William J. David M.D., F.A.

Mailing Address 910 Williston Park Pt
Ste 1000

City

Lake Mary

State

FL

Zip Code

32746-2163

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Cardiovascular Center, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : EBDBD748FC615DB969A

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Timothy A. Dewhurst M.D., F.A.

Mailing Address 5620 W Mercer Way

City

Mercer Island

State

WA

Zip Code

98040-4841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Group Health Cooperative

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 25 / 2013

Transaction ID : 4EE6961A5AC067DEDD3D

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Claire S. Duvernoy M.D., F.A.

Mailing Address 456 Hilldale Dr

City

Ann Arbor

State

MI

Zip Code

48105-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan Health System

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 167DA39C1819067ACB8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Arthur Lee Eberly III, M.D.,

Mailing Address PO Box 8795

City

Greenville

State

SC

Zip Code

29604-8795

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carolina Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1881.00

Date of Receipt

09 / 25 / 2013

Transaction ID : 4BF2BF54537A4EC14B59

Amount of Each Receipt this Period

209.00

Full Name (Last, First, Middle Initial)

c. Blair D. Erb Jr., M.D.,

Mailing Address 905 Highland Blvd
Ste 4330

City

Bozeman

State

MT

Zip Code

59715-6901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1960.06

Date of Receipt

09 / 25 / 2013

Transaction ID : 4F37BC5FEB96F24AB4DE

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

667.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 63

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Evans M.D., F.A.

Mailing Address 130 Ashlei Ln

City

Searcy

State

AR

Zip Code

72143-3024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinic Arkansas

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	3		

Transaction ID : 4238816A067E88965C4B

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Susan I. Farkas M.D., F.A.

Mailing Address 1406 62nd Ave N

City

Fargo

State

ND

Zip Code

58102-6001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0		2	0	1	3		

Transaction ID : C4821047C6B15CB2320

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. James W. Fasules M.D., F.A.

Mailing Address 2718 Stephenson Ln NW

City

Washington

State

DC

Zip Code

20015-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.03

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	5		2	0	1	3		

Transaction ID : 4EEEEA5280130EBB76C12

Amount of Each Receipt this Period

166.67

SUBTOTAL of Receipts This Page (optional)..... ►

1266.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter G. Fattal M.D., F.A.

Mailing Address 8 E Hannum Blvd

City

Saginaw

State

MI

Zip Code

48602-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Cardiovascular Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 0BA66AEC0795C547F35

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Kevin Fitzpatrick PA-C

Mailing Address 2400 N St NW
Heart House

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 18 / 2013

Transaction ID : 416484D27412CDD04216

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Eduardo D. Flores M.D., F.A.

Mailing Address 905 E Canton Rd

City

Edinburg

State

TX

Zip Code

78539-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinic, Inc.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 11 / 2013

Transaction ID : 1BAE91BDF41CC9218E9

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

698.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David Howard Forst M.D., F.A.

Mailing Address 936 S Bates St

City

Birmingham

State

MI

Zip Code

48009-1976

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 3A9D976A44F324D9FE5

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael C. Foster M.D., F.A.

Mailing Address 2001 Laurel St

City

Columbia

State

SC

Zip Code

29204-1018

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Carolina Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 52C9637ACD7AEB89FA3

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Michael F. Gilson M.D., F.A.

Mailing Address 100 Prospect St

City

Providence

State

RI

Zip Code

02906-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 03 / 2013

Transaction ID : 4AC0BC980E73CC26262E

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Prospero B. Gogo Jr., M.D.,

Mailing Address 111 Colchester Ave
 McLure 1 Cardiology

City Burlington State VT Zip Code 05401-1473

FEC ID number of contributing
federal political committee.

C

Name of Employer
 University of Vermont School of Medicine

Occupation
 INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

09 / 23 / 2013

Transaction ID : 40F390CCCD5272E4BC73

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Sarah J. Goodlin M.D., F.A.

Mailing Address PO Box 1034
 Geriatrics P3-Med

City Portland State OR Zip Code 97207-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Portland VAMC

Occupation
 HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 5CB95EC52CDC455904F

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Allen L. Goree MHA, CMPE

Mailing Address 1605 E Broadway
 Ste 300

City Columbia State MO Zip Code 65201-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Missouri Heart Center

Occupation
 ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 90CEBDEDFDEAA3F36F7

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

583.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas A. Haffey D.O., F.A.

Mailing Address 7089 Orchard St

City State Zip Code
 Arvada CO 80007-6910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : E844C1D296DC570AAD2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Eileen M. Handberg Ph.D., A.R.

Mailing Address 1410 NW 46th Ter

City State Zip Code
 Gainesville FL 32605-4563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shands at the University of Florida

Occupation

CARDIOVASCULAR RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : CDE8FB1612F2E7186D1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dale A. Hansen M.D., F.A.

Mailing Address 5421 S 61st Court

City State Zip Code
 Lincoln NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bryan LGH Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 11 / 2013

Transaction ID : 543A9262642E19D1029

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jerry Alan Hanson M.D., F.A.

Mailing Address 17150 Wild Way

City

Los Gatos

State

CA

Zip Code

95030-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

Transaction ID : 2BDBF0E56F769162733

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Nidal H. Harb M.D., F.A.

Mailing Address 7000 Jersey Ridge Rd

City

Davenport

State

IA

Zip Code

52807-3221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

Transaction ID : F2685230BE6A939FA13

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Anthony A. Hilliard M.D., F.A.

Mailing Address 725 W Sunset Dr

City

Redlands

State

CA

Zip Code

92373-6937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Loma Linda University Medical Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

Transaction ID : D6024F3BB4C6DBB3D7C

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

800.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David R. Holmes Jr., M.D.,

Mailing Address 1122 21st St NE

City

Rochester

State

MN

Zip Code

55906-4059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	3

Transaction ID : 45DAB90D0DD23BCD7E40

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Patrick J. Hughes M.D., F.A.

Mailing Address 2141 W Lawn Ave

City

Madison

State

WI

Zip Code

53711-1949

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	3

Transaction ID : EAB7F0DA2938A9D99CC

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Daniel J. Humiston M.D., F.A.

Mailing Address 1928 Maple Hollow Way

City

Bountiful

State

UT

Zip Code

84010-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Utah Cardiology, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	3

Transaction ID : 4252B5339B3DE3C1EFC8

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)..... ►

541.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pamela A. Ivey M.D., F.A.

Mailing Address 52 Quail Run Rd

City

Henderson

State

NV

Zip Code

89014-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants of Nevada

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 25 / 2013

Transaction ID : 4B0E93371F8F32A0D808

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Robert S. Iwaoka M.D., F.A.

Mailing Address 7342 Governors Hill Ln

City

Charlotte

State

NC

Zip Code

28211-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mid Carolina Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 11 / 2013

Transaction ID : 3A6F20B16305E98794E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. John M. Johnstone M.D., F.A.

Mailing Address 819 W Main St

City

Richmond

State

KY

Zip Code

40475-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 24 / 2013

Transaction ID : 4ED693C29FDEED71147A

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

358.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James G. Jollis M.D., F.A.

Mailing Address 211 Markham Dr

City

Chapel Hill

State

NC

Zip Code

27514-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Duke University Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0			2	0	1	3	

Transaction ID : 87A1D7A4E623DA3799E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Atilla Kayalar M.D., F.A.

Mailing Address 6 Hearts Way

City

Queensbury

State

NY

Zip Code

12804-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Adirondack Cardiology Assoc., PC

Occupation

INTERNAL MED.

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	9			2	0	1	3	

Transaction ID : 5E7B794E82DA8674020

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jerry D. Kennett M.D., M.A.

Mailing Address 4614 Copperstone Ct

City

Columbia

State

MO

Zip Code

65203-1696

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Cardiovascular Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	5			2	0	1	3	

Transaction ID : 40D3B5B4FB85A3B21699

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jerry D. Kennett M.D., M.A.

Mailing Address 4614 Copperstone Ct

City
Columbia

State
MO

Zip Code
65203-1696

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Cardiovascular Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 64FD2677B229952081C

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Steven E. Kornberg M.D., F.A.

Mailing Address 10 E New York Ave
Ste 2

City

Somers Point

State

NJ

Zip Code

08244-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shore Heart Consultants, LLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 18 / 2013

Transaction ID : 4769A4D4D2C8980D3087

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

c. Smadar Kort M.D., F.A.

Mailing Address 65 Mimosa Dr

City

Roslyn

State

NY

Zip Code

11576-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stony Brook University Medical Center

Occupation

ECHOCARDIOGRAPHY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

09 / 25 / 2013

Transaction ID : 4B409C80931D963C2AEF

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James E. Kure M.D., F.A.

Mailing Address 10140 Halsey Rd

City

Grand Blanc

State

MI

Zip Code

48439-8208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 19 / 2013

Transaction ID : F9A88F4A60E45372FB0

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

B. Austin H. Kutscher Jr., M.D.,

Mailing Address 29 Shippen Ct

City

Flemington

State

NJ

Zip Code

08822-6835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hunterdon Cardiovascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

09 / 30 / 2013

Transaction ID : D5C823F9A9288517DBA

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

c. Gilead I. Lancaster M.D., F.A.

Mailing Address 15 Mine Hill Rd

City

Redding

State

CT

Zip Code

06896-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital Dept of Echo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

09 / 01 / 2013

Transaction ID : 4706B2F159F551F3464A

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1583.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Norman E. Lepor M.D., F.A.Mailing Address 99 N La Cienega Blvd
Ste 203

City	State	Zip Code
Beverly Hills	CA	90211-2285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2013

Transaction ID : BA21C269C028F66FBDE

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City	State	Zip Code
Neenah	WI	54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Appleton Cardiology ThedaCare

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : 43C8ACD5C24344339E06

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

C. Barry K. Lewis D.O., F.A.

Mailing Address 7299 Huntcliff

City	State	Zip Code
West Bloomfield	MI	48322-2945

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Henry Ford Health System

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : F278996C1C53CCB5778

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1458.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sandra J. Lewis M.D., F.A.

Mailing Address 5342 SW Hewett Blvd

City

Portland

State

OR

Zip Code

97221-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Cardiovascular Institute

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

09 / 25 / 2013

Transaction ID : 4BC78D571F1C45C96883

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. John W. Lynch III, M.D.,

Mailing Address 25 Grandon Rd

City

Dayton

State

OH

Zip Code

45419-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : D144DAF0D62E8002DD9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Michael L. Main M.D., F.A.

Mailing Address 4330 Wornall Rd

Ste 2000

City

Kansas City

State

MO

Zip Code

64111-5939

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 41D23CA8AE185037B34

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1333.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ramin Manshadi M.D., F.A.

Mailing Address 6273 Crooked Stick Cir

City State Zip Code
Stockton CA 95219-1858

FEC ID number of contributing
federal political committee.

C

Name of Employer
San Joaquin Cardiology Medical Group

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : CC10AAD46EC0F750B0B

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. John E. Mayer Jr., M.D.,

Mailing Address 44 Skyline Dr

City State Zip Code
Wellesley MA 02482-7214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Childrens Hospital

Occupation
CONGENITAL CARDIAC SURGERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : F757FFB21AF8DF1EAE9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Christopher Columbus McClure III, M.D.,

Mailing Address 481 Pond Apple Rd

City State Zip Code
Clarksville TN 37043-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : 090D5165EC0DCCA513C

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. George D. Moutsatsos M.D., F.A.

Mailing Address 904 Westover Rd

City State Zip Code
Wilmington DE 19807-2981

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : 4829CCBAF7774CC6130

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mohammad Reza Movahed M.D., F.A.

Mailing Address 1080 N Camino Miraflores

City State Zip Code
Tucson AZ 85745-2286

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : 89F58B88F2CD3D37E5E

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

c. Marc A. Mugmon M.D., F.A.

Mailing Address 7193 Collingwood Ct

City State Zip Code
Elkridge MD 21075-5548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : 49D4878CA2EA396E5441

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

633.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gary W. Olson M.D., F.A.

Mailing Address 1523 Thornebrooke Cir

City

Dalton

State

GA

Zip Code

30720-3027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dalton Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	3		

Transaction ID : 3BE397F873795142950

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Vincent M. Pacienza M.D., F.A.

Mailing Address 75 Plandome Rd

City

Manhasset

State

NY

Zip Code

11030-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Manhasset Cardiovascular PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	3		

Transaction ID : 6A042716EABD56D64E4

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

c. Vaughn W. Payne M.D., F.A.

Mailing Address 145 Hager Ln

City

Staffordsville

State

KY

Zip Code

41256-9144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kentucky Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.97

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	3		

Transaction ID : 4DAD94B75D72D4F622A2

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

573.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Vaughn W. Payne M.D., F.A.

Mailing Address 145 Hager Ln

City State Zip Code
 Staffordsville KY 41256-9144

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Kentucky Heart Institute

Occupation
 ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.97

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : 1C65681C309DD94D197

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Neal S. Perlmutter M.D., F.A.

Mailing Address 1820 9th St W

City State Zip Code
 Kirkland WA 98033-4837

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.50

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 25 / 2013

Transaction ID : 44059DA18E043E88C772

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

c. Neal S. Perlmutter M.D., F.A.

Mailing Address 1820 9th St W

City State Zip Code
 Kirkland WA 98033-4837

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.50

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : EFCD5BB54C690C99F6C

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1312.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bradley Personius M.D., F.A.

Mailing Address 195 Serenity Ln

City

Grants Pass

State

OR

Zip Code

97526-9756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 11 / 2013

Transaction ID : E23615B3F355CEF5FD8

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City

Casper

State

WY

Zip Code

82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

09 / 18 / 2013

Transaction ID : 4370B4A25E42783B0B46

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City

Casper

State

WY

Zip Code

82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 681C8D714DFD7D7861E

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Geetha Raghuveer M.B.B.S.,

Mailing Address 5354 Mission Woods Rd

City

Shawnee Mission

State

KS

Zip Code

66205-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Mercy Hospital

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

09 / 25 / 2013

Transaction ID : 43218580AD917F8D4995

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. David Ramos M.D., F.A.

Mailing Address 1100 Forrest Ave

City

Dover

State

DE

Zip Code

19904-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Office Building

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : CF161D76CB044A5FDC6

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Mark A. Rasak D.O., F.A.

Mailing Address 28080 Grand River Ave
Ste 300

City

Farmington Hills

State

MI

Zip Code

48336-5966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Clinical Associates PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 19 / 2013

Transaction ID : E5999F546435618DE12

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1508.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott J. Ratner M.D., F.A.

Mailing Address 407 Franklin Ave

City

Franklin Square

State

NY

Zip Code

11010-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 11 / 2013

Transaction ID : 699881174AEE0D1EACC

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Michael E. Ring M.D., F.A.

Mailing Address 122 W 7th Ave
Ste 450

City

Spokane

State

WA

Zip Code

99204-2339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinics Northwest

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2013

Transaction ID : C79012AB2DF3C394B6D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. John F. Robb M.D., F.A.

Mailing Address 9 Woodcock Ln

City

Etna

State

NH

Zip Code

03750-4403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dartmouth-Hitchcock Medcl Ctr

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 30 / 2013

Transaction ID : B9716A77182E03F8BD6

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. George P. Rodgers M.D., F.A.Mailing Address 11673 Jollyville Rd
Ste 205-B

City	State	Zip Code
Austin	TX	78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2013

Transaction ID : 4F21827B84BBF7DCCBDA

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. George P. Rodgers M.D., F.A.Mailing Address 11673 Jollyville Rd
Ste 205-B

City	State	Zip Code
Austin	TX	78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : 154247A42087744A2E4

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Orlando Rodriguez M.D., F.A.Mailing Address 735 Ave Ponce De Leon
Torre Medica Auxilio Mutuo

City	State	Zip Code
Hato Rey	PR	00917-5026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ORV Interventional Cardiology

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : 4C88BF8F7273EF7226FB

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

416.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert L. Rothbard M.D., F.A.

Mailing Address 2000 Via Tuscany

City

Winter Park

State

FL

Zip Code

32789-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 936C01DEB3E29B4FE6D

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. John S. Rumsfeld M.D., Ph.D

Mailing Address 130 S Cherry St

City

Denver

State

CO

Zip Code

80246-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Denver VA Medical Center, University o

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

09 / 25 / 2013

Transaction ID : 4FAE8D6954146622C7FE

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. R. Gregory Sachs M.D., F.A.

Mailing Address 92 Mountain Ave

City

Summit

State

NJ

Zip Code

07901-3478

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 354F1733EA38F401A63

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John F. Schmedtje Jr., M.D.,

Mailing Address 2619 Avenham Ave SW

City

Roanoke

State

VA

Zip Code

24014-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Roanoke Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 1F6BDE96743C04C42F2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael K. Schroyer RN, A.A.C.

Mailing Address 9065 Pebblepointe Cir

City

Zionsville

State

IN

Zip Code

46077-8992

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Vincent Heart Center of Indiana

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.38

Date of Receipt

09 / 25 / 2013

Transaction ID : 415D8F41F65305A3BBF8

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Kenneth M. Shaffer M.D., F.A.

Mailing Address 4314 Medical Pkwy
Ste 200

City

Austin

State

TX

Zip Code

78756-3332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Cardiology Associates

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 30 / 2013

Transaction ID : DD0CA95F99CB004E7F2

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

633.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. M. Eugene Sherman M.D., F.A.

Mailing Address 5110 S Hanover Way

City

Englewood

State

CO

Zip Code

80111-6239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aurora Medical Associates, PC

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	3		

Transaction ID : 441D896EFBE30B5EE616

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

B. John W. Shuck M.D., F.A.

Mailing Address 1100 Forrest Ave

City

Dover

State

DE

Zip Code

19904-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	3		

Transaction ID : 4D409EFBFA1C6193064F

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

C. Gregory Lawrence Simone M.D., F.A.

Mailing Address 604 Keeler Woods Dr NW

City

Marietta

State

GA

Zip Code

30064-2064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wellstar Cardiovascular Medicine

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	3		

Transaction ID : 0CAB4ADFEB696F85DCA

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

1823.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan Glen Smith M.D.

Mailing Address 140 Success Mine Loop

City

Grass Valley

State

CA

Zip Code

95945-9764

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHW: Catholic Healthcare West

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 19 / 2013

Transaction ID : F3407973FD9EB3E1AA8

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. David Evan Solarz M.D.

Mailing Address 88 E Newton St
C821

City

Boston

State

MA

Zip Code

02118-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Boston University Medical CenterDept o

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 2F169DD044CD4C37B1A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. D. Gary Soya M.D., F.A.

Mailing Address PO Box 51624

City

Amarillo

State

TX

Zip Code

79159-1624

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C918D74D5E852D3A000

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael J. Springer M.D., F.A.

Mailing Address 803 Towner Pl

City

Louisville

State

KY

Zip Code

40223-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 25 / 2013

Transaction ID : 467C90EF3A5E419DBDDb

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. Randall P. Stark M.D., F.A.

Mailing Address 4040 Coon Rapids Blvd NW
Ste 120

City

Minneapolis

State

MN

Zip Code

55433-4568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Heart CenterMetropolitan Heart &

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 9A4CF67CE54DC9E0C21

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

c. John S. Strobel M.D., F.A.

Mailing Address 3407 E Olcott Blvd

City

Bloomington

State

IN

Zip Code

47401-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Internal Medicine Associates

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 274525971012A7FB039

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

591.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Margaret M. Sullivan M.D., F.A.

Mailing Address 501 N Preston St

City	State	Zip Code
Ennis	TX	75119-3928

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : F83ED8DA29332F967D5

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Clifford R. Talbert Jr., M.D.,

Mailing Address 24 S Mount Auburn Rd

City	State	Zip Code
Cape Girardeau	MO	63703-4914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cardiology Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : E0FD1C4F1FA77EE1C79

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Suma A. Thomas M.D., F.A.Mailing Address 7620 Old Georgetown Rd
Apt 1214

City	State	Zip Code
Bethesda	MD	20814-6182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : 4EB9971AB8E5F157F8BD

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

1708.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 63

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Benjamin Tillinger M.D., F.A.

Mailing Address 59 Ornac

Emerson Cardiovascular Associates

City State Zip Code
 Concord MA 01742-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerson Cardiovascular Associates

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 30 / 2013

Transaction ID : DE9FDE8AEC1A726FAA1

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Edward J. Toggart M.D., F.A.

Mailing Address 3600 NW Samaritan Dr
 Ste E350

City State Zip Code
 Corvallis OR 97330-3737

FEC ID number of contributing
federal political committee.

C

Name of Employer

Samaritan Heart & Vascular Institute

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 9C1839A64698594747A

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Edward Robert Tuohy IV, M.D.,

Mailing Address 84 Merry Meet Ctr

City State Zip Code
 Fairfield CT 06824-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiac Specialists, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 30 / 2013

Transaction ID : F04BDDFD8A1AC6B11DA

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sanjeev G. Vaishampayan M.D., F.A.

Mailing Address 1148 Norman Dr
Ste 3

City State Zip Code
Manteca CA 95336-5961

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stockton Cardiology Medical Group

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : C5E20F17F5528F45DD2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Andrew Van Tosh M.D., F.A.

Mailing Address 100 Port Washington Blvd
Nuclear Cardiology

City State Zip Code
Roslyn NY 11576-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Francis Hospital

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : 4C79C918DE88BA785CF

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Prasanna Venkatesh Kumar M.B.B.S.,

Mailing Address 302 Breeze Dr

City State Zip Code
Carterville IL 62918-2364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prairie Cardiovascular

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : 8B183E6A37A36C8DC07

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 63

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hector O. Ventura M.D., F.A.

Mailing Address 1514 Jefferson Hwy

City

New Orleans

State

LA

Zip Code

70121-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ochsner Clinic FoundationDept of Card

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2013

Transaction ID : BA6C894204AE3F9F86E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Krishnaswami Vijayaraghavan M.B.B.S.

Mailing Address 2817 E Ludlow Dr

City

Phoenix

State

AZ

Zip Code

85032-5665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

09 / 25 / 2013

Transaction ID : 4B03B6AADD57C690B83E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Juan Villafane M.D., F.A.

Mailing Address 1400 Willow Ave
1205

City

Louisville

State

KY

Zip Code

40204-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PEDIATRICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

09 / 25 / 2013

Transaction ID : 42D59AE4048D57A91299

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 63
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert N. Vincent M.D., C.M.

Mailing Address 2835 Brandywine Rd
Ste 300

City State Zip Code
Atlanta GA 30341-5540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 5ACA05118509BE0D155

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Thad F. Waites M.D., F.A.

Mailing Address 1017 Richburg Rd

City State Zip Code
Hattiesburg MS 39402-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

09 / 30 / 2013

Transaction ID : 4923B62FF02B431BB6A9

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

c. Howard T. Walpole Jr., M.D.,

Mailing Address 31 Northumberland

City State Zip Code
Nashville TN 37215-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.36

Date of Receipt

09 / 25 / 2013

Transaction ID : 4CCB9102C738B1EADA02

Amount of Each Receipt this Period

416.67

SUBTOTAL of Receipts This Page (optional)..... ►

1125.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mary Norine Walsh M.D., F.A.

Mailing Address 428 W 83rd Pl

City
Indianapolis

State
IN

Zip Code
46260-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer
St Vincent Heart Center of Indiana

Occupation
HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 29 / 2013

Transaction ID : 4D3CA2C4BBFA6BFE54F8

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Brian C. Weiford M.D., F.A.

Mailing Address 2009 W 68th St

City
Mission Hills

State
KS

Zip Code
66208-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CONGENITAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 11 / 2013

Transaction ID : 6C495FEB8E151989916

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Timothy R. Wessel M.D., F.A.

Mailing Address 1151 NW 64th Ter

City
Gainesville

State
FL

Zip Code
32605-4218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interventional Cardiologists of Gaines

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : 2F001FF1DBC80DD207C

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Jason West M.D.

Mailing Address 3322 NW Panorama Dr

City State Zip Code
 Bend OR 97701-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bend Memorial Clinic

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 11 / 2013

Transaction ID : 4DC9B0608FC71D1AF991

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. Steven R. West M.D., F.A.

Mailing Address 3701 S Poplar Dr

City State Zip Code
 Columbus IN 47201-4972

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.03

Date of Receipt

09 / 25 / 2013

Transaction ID : 47149BA69520F090AE31

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

c. Michael C. Widmer M.D., F.A.

Mailing Address 2753 NE Red Oak Dr

City State Zip Code
 Bend OR 97701-8348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

09 / 25 / 2013

Transaction ID : 4B9E88FA7B416828DFD2

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 63

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kim Allan Williams Sr., M.D.,

Mailing Address 1135 Shelby St

City

Detroit

State

MI

Zip Code

48226-2639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wayne State University School of Medic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	3		

Transaction ID : 6CD98842E6512302FD2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. R. Scott Wright M.D., F.A.

Mailing Address 200 1st St SW

Divide of Crdlgy Gonda 5-477

City

Rochester

State

MN

Zip Code

55905-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	3		

Transaction ID : 50154536EA12740FA8C

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Lambert A. Wu M.D., F.A.

Mailing Address 1524 NW Grove Ave

City

Topeka

State

KS

Zip Code

66606-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cotton O'Neil Heart Center

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	3		

Transaction ID : 480D9BFF0A4A23E5DC9D

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

583.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Janet Fredal Wyman MSN, NP, A

Mailing Address 960 Westchester Rd

City

Grosse Pointe Park

State

MI

Zip Code

48230-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Hospital

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

Transaction ID : 9A350FB4333A07757A2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Raymond S. Yen M.D., F.A.Mailing Address 315 N 3rd Ave
Ste 207

City

Covina

State

CA

Zip Code

91723-1917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Foothill Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

Transaction ID : F710387FC3D652A79C9

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

1250.00

TOTAL This Period (last page this line number only)..... ►

46280.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14290.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2013

Transaction ID : 106E60F955419769FD5

Amount of Each Receipt this Period

678.31

Reimbursement for August Amex Fees and September Merchant Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

678.31

678.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 63

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
September 2013 Amex Fees

Candidate Name

001

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : VAC331D9F313FCDCBE64

Amount of Each Disbursement this Period

118.89

Full Name (Last, First, Middle Initial)

B. Wells Fargo, N.A.Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920

Purpose of Disbursement
September 2013 Merchant Fees

Candidate Name

001

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2013

Transaction ID : M6248F1EF5B7A09199C9

Amount of Each Disbursement this Period

561.93

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

680.82

680.82

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bera for Congress

Mailing Address Post Office Box 582496

City	State	Zip Code
Elk Grove	CA	95758

Purpose of Disbursement
2014 Primary

011

Candidate Name

Ameriash B. BeraCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : ED4581ED330C891E335

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Billy Long for Congress

Mailing Address 3246 E. Ridgeview Street

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement
2014 Primary

011

Candidate Name

William H. Long IICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : 003DABA384BC6F2B419

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Cathy McMorris Rodgers for Congress

Mailing Address Box 137

City	State	Zip Code
Spokane	WA	99210-0137

Purpose of Disbursement
2014 Primary

011

Candidate Name

Cathy McMorris RodgersCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 6FC27D8A8936C5F4624

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles Boustany Jr. MD for Congress, Inc.

Mailing Address PO Box 80126

City Lafayette	State LA	Zip Code 70598-0126
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Charles W. Boustany Jr.

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : 7E331C031A9C0900076

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Collins for Senator

Mailing Address PO Box 1096

City Bangor	State ME	Zip Code 04402
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Susan Margaret Collins

Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2013

Transaction ID : 4E11542D3FE7B12A999

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Crowley for Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst	State NY	Zip Code 11373
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Joseph Crowley

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2013

Transaction ID : FEF293FCBC01239DEC4

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democrats Win Seats (DWS PAC)

Mailing Address PO Box 83142

City	State	Zip Code
Gaithersburg	MD	20883

Purpose of Disbursement
2013 Contribution

011

Candidate Name

Democrats Win Seats (DWS PAC)Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2013

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2013

Transaction ID : C5C6C3767E6ED3FF2E0

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Dr. Raul Ruiz for Congress

Mailing Address PO Box 6116

City	State	Zip Code
La Quinta	CA	92248

Purpose of Disbursement
2014 Primary

011

Candidate Name

Raul RuizCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : B8EAA1CFF9AA6AA83BE

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of John Barrow

Mailing Address PO Box 1001

City	State	Zip Code
Augusta	GA	30903

Purpose of Disbursement
2014 Primary

011

Candidate Name

John Jenkins BarrowCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : BF7014C589F81DD76C0

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Kelly Ayotte

Mailing Address PO Box 937

City Manchester	State NH	Zip Code 03105-0937
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Purpose of Disbursement
2016 Primary

011

Candidate Name

Kelly A. AyotteCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : AEAFFDD635A130DA985

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Friends of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara	State CA	Zip Code 93121
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Lois CappsCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 0436A825C2E706042C4

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Roy Blunt

Mailing Address PO Box 10178

City Columbia	State MO	Zip Code 65205-4002
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Purpose of Disbursement
2016 Primary

011

Candidate Name

Roy D. BluntCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : FD14DDF2F158F6DC1B6

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement
2016 Primary

011

Candidate Name

Charles E. SchumerCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 32A59BB19A79317D701

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Gardner for Congress

Mailing Address 9227 E. Lincoln Ave., #200-234

City	State	Zip Code
Lone Tree	CO	80124

Purpose of Disbursement
2014 Primary

011

Candidate Name

Cory GardnerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : 857FA979ECBBEC7907F

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Guthrie for Congress

Mailing Address PO Box 9639

City	State	Zip Code
Bowling Green	KY	42102-9639

Purpose of Disbursement
2014 Primary

011

Candidate Name

S. Brett GuthrieCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : 67268E1B30C8710EEFB

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jim Gerlach for Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Mailing Address PO Box 87

City	State	Zip Code
Uwchland	PA	19480-0087

Transaction ID : 1AD7B7AE57EF68E6C86Purpose of Disbursement
2014 Primary

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

James W. GerlachCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 06

Full Name (Last, First, Middle Initial)

B. Kevin McCarthy for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Mailing Address PO Box 12667

City	State	Zip Code
Bakersfield	CA	93389-2667

Transaction ID : 15A18ABB9FE31613C47Purpose of Disbursement
2014 Primary

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

Kevin McCarthyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 23

Full Name (Last, First, Middle Initial)

C. Kurt Schrader for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Mailing Address PO Box 3314

City	State	Zip Code
Oregon City	OR	97045

Transaction ID : 0923FD2E67EA9E63824Purpose of Disbursement
2014 Primary

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

Kurt SchraderCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 05

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lance for Congress

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement
2014 Primary

011

Candidate Name

Leonard LanceCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 07

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2013

Transaction ID : 2601882DC516A793E33

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lone Star Leadership PAC

Mailing Address PO Box 30844

City	State	Zip Code
Bethesda	MD	20824

Purpose of Disbursement
2013 Contribution

011

Candidate Name

Lone Star Leadership PACCategory/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2013

☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : D00E473670EA2C39294

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Marsha Blackburn for Congress, Inc.

Mailing Address PO Box 3750

City	State	Zip Code
Brentwood	TN	37024-3750

Purpose of Disbursement
2014 Primary

011

Candidate Name

Marsha BlackburnCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 07

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : F1F4DC6A7289B7F5FD6

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matsui for Congress

Mailing Address PO Box 1738

City	State	Zip Code
Sacramento	CA	95812

Purpose of Disbursement
2014 Primary

011

Candidate Name

Doris O. MatsuiCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : 63A34FB8CFFA66AEA5B

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Pascrell for Congress

Mailing Address PO Box 100

City	State	Zip Code
Teaneck	NJ	07666

Purpose of Disbursement
2014 Primary

011

Candidate Name

William J. Pascrell Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : 6B33F6B2957C6E7ECF5

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Pete Sessions for Congress

Mailing Address PO Box 823047

City	State	Zip Code
Dallas	TX	75382-3047

Purpose of Disbursement
2014 Primary

011

Candidate Name

Peter Anderson SessionsCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2013

Transaction ID : 3FD7E7EBBEE5F0E5859

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. PITTSPAC

Mailing Address 223 W Franklin St

City	State	Zip Code
Ephrata	PA	17522

Purpose of Disbursement
2013 Contribution

011

Candidate Name

PITTSPACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : AD716258B97A4528792

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Renee Ellmers for Congress Committee

Mailing Address PO Box 99567

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
2014 Primary

011

Candidate Name

Renee Jacisin EllmersCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : 93BD6A5AC73E01816BD

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Richard E Neal for Congress Committee

Mailing Address 76 Magnolia Terrace

City	State	Zip Code
Springfield	MA	01108

Purpose of Disbursement
2014 Primary

011

Candidate Name

Richard Edmund NealCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : 783F06B9E169958F709

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tiberi for CongressMailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231-2098

Purpose of Disbursement
2014 Primary

011

Candidate Name

Patrick J. TiberiCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : 22501B8ACF9F221A2FB

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Tim Scott for Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement
2014 Special Primary

011

Candidate Name

Timothy Eugene ScottCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : FE5441E87EB54B5605B

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Van Hollen for Congress

Mailing Address 10537 St. Paul St.

City Kensington State MD Zip Code 20895

Purpose of Disbursement
2014 Primary

011

Candidate Name

Christopher Van HollenCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 051DD7A776DEF1E4A0C

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Welch for Congress

Mailing Address PO Box 1682

City	State	Zip Code
Burlington	VT	05402

Purpose of Disbursement
2014 Primary

011

Candidate Name

Peter F. WelchCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: VT District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : B9B57B74AD1D41F9606

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

77000.00
